


PATENT NUMBER

PATENT DATE

MT  
KS LHI  
O.I.P.E.  
SCANNED 

**Q.A**

**CLASS**

SUBCLASS

ART UNIT

**EXAMINER**

**TITLE OF INVENTION:**

**APPLICANT(S):**

**ISSUING CLASSIFICATION**

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	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)		<b>NOTICE OF ALLOWANCE MAILED</b>	
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